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|--|---|--|---|--|---------------------------|--------------------------------|
| SERIAL NUMBER 10/595,617 | FILING or 371(c) DATE 05/01/2006 RULE | CLASS 546 | GROUP ART UNIT 3771 | ATTORNEY DOCKET NO. PB60534USW | | |
| APPLICANTS Paul Kenneth Rand, Hertfordshire, UNITED KINGDOM; ** CONTINUING DATA ***** This application is a 371 of PCT/EP04/12357 11/01/2004 ** FOREIGN APPLICATIONS ***** Yes, BW UNITED KINGDOM 0325627.8 11/03/2003 ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/03/2007 | | | | | | |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/BRIAN D WON/</u> Examiner's Signature | | <input type="checkbox"/> Met after Allowance Initials | STATE OR COUNTRY UNITED KINGDOM | SHEETS DRAWINGS 15 | TOTAL CLAIMS 32 | INDEPENDENT CLAIMS 1 |
| ADDRESS GLAXOSMITHKLINE CORPORATE INTELLECTUAL PROPERTY, MAI B482 FIVE MOORE DR., PO BOX 13398 RESEARCH TRIANGLE PARK, NC 27709-3398 UNITED STATES | | | | | | |
| TITLE Hand-Held Capsule Device | | | | | | |
| FILING FEE RECEIVED 1500 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | | |